## UNITED STATES ENVIRONMENTAL PROTECTION AGENCY



WASHINGTON D.C. 20460

ML-36218

NOV 20 2007

OFFICE OF PREVENTION, PESTICIDES AND TOXIC SUBSTANCES

Dear Submitter:

This letter acknowledges receipt of your **Premanufacture Notice (PMN)** form under Section 5(a) of the Toxic Substances Control Act (TSCA) for TS# <u>AG0702</u>. The *ninety (90)-day review period* will begin on <u>11/14/2007</u>, which is the date of receipt of the submission.

Your submission is complete and has been assigned case number(s): <u>P-08-0088</u>. If your PMN is consolidated, case numbers are assigned to chemicals in the order in which they are listed in the notice. For example, a notice that lists chemical A followed by chemical B, will be assigned P-03-1 for chemical A and P-03-2 for chemical B. All other chemicals listed will proceed in that order. Any further correspondence regarding this notice should reference the case number cited in this letter.

A Notice of Commencement (NOC) form is enclosed for your convenience. This form is required when submitting your NOC.

All correspondence regarding complete submission should be directed to the New Chemicals Notice Management Branch at (202) 564-8999. The review period is generally three weeks for a provisional risk management decision from the FOCUS meeting. This decision will be posted at the EPA web site at <a href="https://www.epa.gov/oppt/newchems/dropstat.htm">www.epa.gov/oppt/newchems/dropstat.htm</a>. Please check this web site for the status of your submission. You will need your assigned case number, no other identifier will be associated with the submission.

Additional forms and Instruction Manual are available from the TSCA Information Service Hotline at (202) 554-1404. Copies may also be obtained thru the above web site.

Enclosure

Records and Dockets Management Branch Information Management Division Mail Code 7407M

Internet Address (URL) \* Recycled/Recyclable \*Printed with vegetable oil based in



10 A	SENDER: COMPLETE THIS SECTION  Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.  Print your name and address on the reverse so that we can return the card to you.  Attach this card to the back of the mailpiece, or on the front if space permits.  1. Article Addressed to:	A. Signature  X  A. Signature  X  Addresse  B. Received by (Printed Name)  C. Date of Delive  D. Is delivery address different from item 1?  If YES, enter delivery address below:
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	2. Article Number (Transfer from service label) 7005	1160 0004 4341 7412
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